

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. # _____	
Logged In _____	
Scanned _____	
Computer _____	
Audited _____	

COMMITTEE NAME (Must be same as on Statement of Organization)

Kids First

IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name _____ Political Party (if applicable) _____

Office Sought _____ District (if Senate or House) _____

JAN 19 2006
PM 1.18.06

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Kaiser Fish 319-848-3317 Jan. 18.06
SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A January 19, 2005 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate by # 1

- CHECK IF AMENDMENT TO REPORT DATED _____
- Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election <u>January 24, 2005</u>
County & Local Committees, enter County in which Election is held <u>Linn, Johnson, Benton County</u>

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)	\$	<u>281.40</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below).....		<u>600.00</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>0.00</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H).....		<u>0.00</u>
(Schedule H applies to Candidates' Committees Only)		
	SUB-TOTAL	\$ <u>881.40</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>832.43</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>0.00</u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3).....	\$	<u>48.97</u>
<hr/>		
**UNPAID BILLS (From Schedule D - Attach Schedule D).....	\$	<u>0.00</u>
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>0.00</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>0.00</u>
CONSULTANT BREAKDOWN (Schedule G Attached?)		<u>YES</u> <u>NO</u>
CANDIDATE COMMITTEES ONLY:		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	_____
STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.		

For Instructions, See Back of Form

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS – MONEY TAKEN IN
 (Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
 Kids First

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
7/14/05	ID# CK#	Advanced Systems PO Box 57 Waterloo, IA 50704		\$50.00	<input type="checkbox"/>
6/13/05	ID# CK#	Rick Schmitt Construction PO Box 11334 Cedar Rapids, IA 52410		50.00	<input type="checkbox"/>
6/15/05	ID# CK#	Farm Estate Strategies 119 3rd St #121 Cedar Rapids, IA 52401		25.00	<input type="checkbox"/>
6/27/05	ID# CK#	Dan Seda 1440 Butternut Lane NE Swisher, IA 52338		200.00	<input type="checkbox"/>
1/5/06	ID# CK#	OPN Architects 625 1st Street SE Suite 460 Cedar Rapids, IA 52401		250.00	<input type="checkbox"/>
1/12/06	ID# CK#	Marilyn Miller 3138 Valley Pl NE Solon, IA 52333		25.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 600.00	
TOTAL (if last page of this schedule)				\$ 600.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)
Kids First

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
3/16/05	ID# CK#	Drew Fisher 1432 Hickory Hollow RD NE Solon, IA 52333	Stamps and copy charges fro final batch of vote yes post cards	\$ 79.82
12/28/05	ID# CK#	Allegra Printing 3939 16th Avenue SW Cedar Rapids, IA 52404	Copy charges and labeling of vote yes cards	148.91
12/30/05	ID# CK#	Mary Gudenkauf PO Box 326 Swisher, IA 52338	Reimbursement for second allegra printing, postage and paper for vote yes post cards	343.71
1/6/05	ID# CK#	Sandy Flatgard 1348 Hickory Hollow RD NE Solon, IA 52333	Reimbursement for Kids First door pirizes for Family Fun night	259.99
	ID# CK#			
SUB-TOTAL				\$ 832.43
TOTAL (if last page of this schedule)				\$ 832.43

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)
Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
 Kids First

Reset Form

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
				\$	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL	\$ 0.00
TOTAL (if last page of this schedule)	\$ 0.00

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.